

**Form 4-1**

Distribution:	Executive Order G-70-23-AC Exhibit 4	Report No.: _____ Test Date: _____ Test Times: _____ Run A: _____
	Summary of Source Test Results	
Source Information		Regulatory Representatives
Firm Name and Address	Firm Representative and Title  Phone No. (      )	Test Engineers
Permit Conditions:	Source: <b>GDF Vapor Recovery</b>  GDF # _____ A/C # _____	Permit Services Division/Enforcement Division
		Test Requested By: _____
Operating Parameters:		
Applicable Regulations:		VN Recommended:

### Sources Test Results and Comments:

[illegible]

Results Received by	Date	Results Reviewed by	Date	Results Approved/Disapproved
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